Form (RF-3)		
	Summary Sheet	
Change in Company's premium or rate level	produced by rate revision effective:	9/21/12 New Business
		11/21/12 Renewals
(1)	(2)	(3)
	Annual Premium	Percent
Coverage	Volume (Illinois)*	Change (+ or -) **
	(000)	
1. Automobile Liability		
Private Passenger	\$20,149	2%
Commercial		
2. Automobile Physical Damage		
Private Passenger	\$11,467	2%
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		-

Does the filing apply to certain territory (territories) or certain classes? If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adjustments to Base Rates for BI, PD, UMBI, COMP and COLL.

* Adjusted to reflect all prior rate changes.

Line of Insurance

12. Homeowners

14. Crop Hail

16. Other

13. Commercial Multi-Peril

15. Worker's Compensation

** Change in Company's premium level which results from application of new rates.

Affirmat	tive Insurance Company
N	ame of Company
	Liset Gonzalez
	Product Analyst

SUMMARY SHEET Form (RF-3)

-															10	0/15/	2012	NB	
Chan	ge in C	ompar	ny's pre	emium	or rate	e level i	produc	ed by	rate re	visio	n effe	ctive:			12	2/15/	2012	RN	
Prog	ram:	Al	lied P	rograi	m (C	hica	go a	rea)											
				-	(1)	Ċ	,			(2)						(3)		
								A	nnual	Pre	mium					Per	cent		
				Cov	erage			٧	olume	e (Illi	nois)*	:			Ch	ange	(+ or	<u>-)**</u>	
												-							
	1	Auto	mobile	e Liabi	lity														
				Passer	-				\$5,5	46,4	82					-2.	45%		
		Co	omme	rcial															
	2	Auto	mobile	e Phys	ical Da	amage													
				Passei		Ū			\$1,4	40,7	74					0.0	00%		
			omme		Ŭ												-	-	
	3			her Th	an Au	to													
	4		-	nd The															
	5	Glass	-		•														
	6	Fideli																*****	
	7	Suret	•																
	8		•	Machi	nerv														
	9	Fire	i dila	iviaciii	iici y						*******	—							
	10		nded (Covera	σe														
	11		d Mar		PC											-			
	12		eowne																
	13			al Muli	ti-Peril	1						_				-			
	14	Crop		21 IVIGI	ci i ciii							_							-
	15	Othe																	
	10	Othic	•																
Doe	s filing	only a	annly :	to ceri	tain te	rritory	//terri	tories	or ce	rtain	class	es? If	f so. s	pecify	v:				
		applie											,		,				
3W90 3J1	3X90 319	3Y90 3A16	3Z90 3M38	4A90 2846	4H90 2Y54	4190 3565	2H91 3X74	2191 2X81	2J91 2E86	297 257	2115 2P15	4334 2A37	3×41 2E42	3A49 3049	4A57 4H57	3A73 3072	3578 3778	3F83 3H83	2P58 2G88
411 2A2	319 389	3D16 3E16	3538 3738	2546 2746	3D54 3E54	4A66 2C68	3Y74 3Z74	2Y81 2Z81	2HB6 2HB6	217 29/7	2Q15 2R15	2837 2037	2142 2542	3F49 3F49	4157 2159	3E72 3F72	3U78 3W75	3183 3183	2858 2585
282 2C2	319 3M9	3F16 3G16	3U38 3W38	2W46 2X46	3F54 3G54	2058 2668	4A74 4H74	3081 3881	2186 2K86	2 % 7 2 % 7 2 % 7	2815 2715 2W15	2P37 2Q37 2S37	2T42 2W42 2X42	3G49 3H49 3149	3A59 3H59 3I59	3H72 3172 3172	3X78 3Y75 3Z78	3KS3 3563 3TS3	2788 2W88 2X88
2E2 2P2	359 379	3H16 3H16	3×38 3×38	2Y46 2Z46	3H54 3!54	2H68 2!68	4174 3J75	3F81 3G81	2186 2P86	3A7 3D7	2×15 2×15	2T37 3D37	2V42 3D42	3K49 3L49	3359 3K59	3K72 3M72	4A75 4H78	3W83 3X63	2788 2288
2Q2 2\$2	3U9 3W9	3/16 3K15	3236 4A38	3D46 3E45	3J54 3K54	2169 2K68	3575 4A75	3H51 3881	2Q86 2R86	3E7 3F7	2215 3415	3E37 3F37	3E42 3F42	3M49 3549	3559 3759	3572 3172	4178 2080	3783 3763	3A88 3088
2W2 2X2	3X9	3116 3M16	4H38 4I38	3F45 3G45	3L54 3M54	3F68 3G68	4H75 4I75	3/81 3K81	2586 2766	3G7 3H7 317	3015 3615 3615	3G37 3H37 B137	3H#2 3i42 3i42	3749 3049 3W49	3W59 3X59 3Y59	3U72 3W72 3×72	2HSO 2HSO 2PSO	4A83 4HB3 4I83	3698 3698 3489
2 Y 2 2 Z 2	8Z9 4A9	3516 3716	2039 2E39	3H45 3I46	3554 3754	3H68 3J68	2A76 2876	3181 3M81	2W86 2X86	317 3K7	3G15 3H15	3137 3K37	3K42 3L42	3×49 3×49	3Z59 4A59	3V72 3Z72	2080 3080	2A95 2B85	3168
3D2 3E2	4H9 419	3U16 3W16	2K39 2E39	31.46 31/46	3US4 3WS4	3168 3M68	2976 2076	3581 3781	7756 2786	3L7 3M7	3/15 3/15	3£37 3M37	3542 3742	3Z49 4A49	4H59 4IS9	4A72 4H72	3680 3680	1065 2085	3X89 3L88
3F2 3H2	2A10 2B10	3×16 3×16	2539 2739	3546 3046	3XS4 3Y 5 4	3568 3068	3076 3876	3U81 3W81	3A86 3D86	357 377 307	3K15 3L15 3M15	3537 3737 3037	3U42 3W42 3Y42	4149 4149 2151	3U60 2A61 2851	4172 3E73 3F73	3180 3180 3180	2E85 2165 2P83	3MS8 3S58 3T88
312 312	2E10 2L10	3Z16 4A16	3A39 3D39	3W46 4A46	3254 4454	4A68 4H58	3F76 3H76	3X81 3Y81	3E86 3F85	3W7 3X7	3515 3715	3W37 3X37	3Y42 3Z42	2P51 2Q51	2C61 2D61	3173 3J73	3K80 3L90	2Q8S 2R85	3W88 3X88
3K2 3S2	2P10 2Q10	4H16 4H16	3E39 3F39	4H46 4146	4H54 4I54	4168 3G59	3176 3J76	3Z81 4A81	3G86 3H86	3Y7 3Z7	3W15 3X15	3137 3237	4442 4442	2851 2WS1	2E61 2W61	3K73	3580 3780	2585 2765	3758 3285
372 3U2	2R10 2510	2X17 2Y17	3G39 3H39	2847 2847	2X55 3055	3U69 2870	3K76 3L76	4HB1 4/81	3186 3186	4A7 4H7	3Y15 3Z15	4A37 4H37	4142 2X44	2751 3051	2X61 3M61	3573 3173	3U80 9W80	2W65 2Z85	4A38 4H36
3W2 3X2	2710 2 21 0	2217 3A17	3139	2047 2047	3£55 3F55	2C70 2D70	3576 3176	2A62 2B82	3KS6 3LS6	417	4A15 4H15	4:37 2H38	2L44 2T44	3E51 3F51	4161 4152	3U73 3W73	3×80 3×80	3A85 3D65	4183 2090
3 Y 2 3 Z 2	3A10	3J17 4A17	3K39 3L39	2H47 2H7 2J47	3H55 3155 3J55	2E70 2R70 3J70	3U76 3W76 3X76	2082 2082 2682	3M86 3586 3786	209 289	4:15 2A16	2:38 2:35	2744 3A44	3H51 3IS1	4163 2H64	3X73 3Y73	3780 4A80	3£85 3£85	2690 2690
4A2 4H2	3£10	2A19 2B19	3M39 3539 3739	2K47 2K47 2P47	3X55 3X55	3L70 3570	3776 3276	2H82 2H82	3U86 3W86	2119 219 219	2816 2016 2016	2K38 2L39 2P38	3;44 3M44 3544	3351 3K51 3(5)	31/64 31/64 24/65	3Z73 4A73 4H73	4HSD 4180 2481	3H85 3ISS 3JS5	21.90 2790 2890
412 2A3	3H10	2H19 2H9 2J19	3U39 3W39	2047 2847	3555 3755	3U70 3W70	4A76 4H76	2192 2K82	3X86 3Y86	2K9 2L9	2E16 2H16	2Q38 2R38	3744 3W44	3551 3751	2865 2065	4173 2A74	2881 2081	3×65 3×85	2W90 2X90
283 2H3	3)10 3K10	2R19	37.39	2547 2W47	3US5	4A70 4H70	4176 2A77	2LB2 2P82	3Z86 4A86	2P9 2Q9	2116 2316	2538 2W38	3744 4444	3051 3751	2£65 2H65	2874 2974	2081 2691	3785 3U85	2790 3490
213 213	3M10 3510	2W19 2X19 2Y19	3Y39 3Z39 4A39	2W47 2X47 3Y47	3W55 3XS5 3YS5	4170 2A71	2877 2677	2982 2982 2882	4H86 4H86	289 259	2K16 2L16	2×38 2×38	4H#4 4 44	3Z51 4A51	2965 2065	2074 3874	2HS1	3×85	3090 3690
2K3 213 2P3	3710 3U10 3W10	2Z19 3G19	4H39 4H39	3Z47 3D47	3ZS5 4A55	2871 2C71	2P77 2Q77	2582 2782	2AB7 2BB7	219 2W9 2X9	2P15 2Q16 2R16	2238 3A38 3E38	2846 2846 2046	4H51 4IS1 2C54	2765 2W65 2X65	3F74 3:74 3J74	2J81 2K81 2L81	3795 3785 4A65	3F90 3H90 3H90
2G3 2R3	3×10 3×10	3J19 3L19	2A40 2B40	3G47 3H47	4H55 4I55	2071 2871	3D77 3E77	2W82 2X82	2C67 2D87	3A9 309	2516 2716	3F39 3G38	2045 2646	ZP54 2Q54	2Y65 2Z65	3K74 3L74	2P91 2Q81	4H95 4H55	3)90 3)90
253 2W3	3Z10 4A10	3519 4A19	2C40 2D40	3M47 3U47	2856 2556	2H71 2171	3F77 3H77	2Y82 2782	2E67 2J 3 7	3£9 3£9	2W16 2X16	361£ 361£	2∺±6 2∺46	2854 2854	3465 3065	3574 3 77 4	2881 2581	2485 2885	3190 3590
2X3 2Y3	4H10 4H10	4H19 4H19	2640 2H40	2A48 2B48	3056 3656	2J71 2K71	3:77 3177	3A82 3D82	2K87 2L87	3G9 3H9	2716 2716	3K38 3L39	2/46 2K46	2W54 2X54	3165 3M65	3074 3W74	2781 2W81	2096	3190 3090

American alliance Casualty

																		4191	3W90
223	2P11	2026	2140	2048	3F56	2171	3K77	3E82	2P87	2K91	2891	3191	3191	3391	3W91	4491	4H91	4191	24440
343	2011	2026	2340	2048	3H56	2P71	31.77	3F62	2Q87										
303	3D11	2£26	2K40	2H45	3156	2Q71	3577	3G82	2R87										
383	3£11	2816	2L40	2148	3156	2871	3177	3HB2	2587										
373	3F11	2126	2940	2148	3K56	2571	3077	3182	2767										
. 3/53	3H11	2126	2Q40	2K48	3:56-	2T71	3W77-	9382	2W87-										
3H3	3111	2×26	2840	2P48	3556	2W71	3X77	3K82	2487										
313	3/11	2R26	2540	2048	3156	2×71	3477	3L82	2487										
313	3K11	3G26	2140	2848	3U56	2471	3277	3M82	2287										
3K3	3111	3126	2W40	2548	3W56	2271	4A77	3582	3A37										
313	3511	31.26	2X40	2W48	3X56	3A71	4H77	3782	3097										
3M3	3711	3M26	2740	2X48	3156	3071	4177	3082	3E87										
353	3011	3016	2240	2448	3256	3E71	2A78	3W82	3F87										
373	3W11	4A16	3A40	2749	4A56	3F71	2878	3X82	3G87										
3W3	3×11	2628	3040	3048	4856	3G71	2178	3782	3H87										
3X3	3711	2E28	3 E 4 D	3548	4156	3H71	2K78	8 Z8 2	3197										
3Y3	3Z11	21.28	3F40	3H48	2057	3171	21.78	4A82	3187										
323	4411	2728	3640	3M48	2E57	3371	2978	4H 3 2	3897										
4A3	4H11	3428	3H40	3U48	2157	3%71	2078	4182	3M87										
4H3	4111	3528	3140	2449	2957	3L71	2578	2A83	3587										
413	2W14	3728	3140	2849	2557	3M71	2178	2883	3787										
31 6	2X14	3728	3×40	2049	2457	3571	2W78	2683	3W87										
315	2Y14	3X28	3140	2049	2257	3771	2×79	2E83	3X87										
356	2714	3Y28	35440	2849	3057	3071	2978	2183	3Y87										
445	3A14	4A28	3540	2H49	3657	3W71	2278	2×83	3Z67										
2A7	3114	2233	3T40	2149	3557	3X71	3A78	2183	4487										
287	3514	2H34	3040	2149	3H57	3Y71	3078	1983	4H87										
207	2A15	2134	3W40	2K49	3157	3271	3E78	20,93	4137										
2E7	2815	2134	3×40	2149	3357	4471	3F78	2583	2A88										
2H7	2015	2K34	3740	2P49	3×57	4471	3G78	2W33	2888										
217	2015	2934	3740	2Q49	3557	4171	3H78	2X83	2088										
217	2815	3194	4440	2R49	3757	2A72	3178	2Y63	2068										
2K7	2H15	3134	4840	2549	3W57	2872	3178	2283	2E88										
21.7	2115	3\$34	4140	2W49	3X57	2L72	3K78	8A83	2:88										
297	2115	4434	2H41	2X49	3Y57	2972	31.78	3083	2168										
20,7	2K15	4H34	3041	2449	3 Z 57	2072	3M78	13883	2188										

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): BI and PD factors were modified. Symbol 1 was assigned a factor.

- * Adjusted to reflect all prior rate changes
- ** Change in Company's premium level which will result from application of new rates.

American Alliance Casualty Co.
Name of Company
Shelly McClaskey
Underwriting Manager

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 2/4/13 New-Business and Renewal

	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private		
_	Passenger Commercial	\$597,167	1.0%
2.	Automobile Physical Damage Private Passenger Commercial	\$306,998	2.5%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
	Crop Hail		
15.	Other		
	Line of Insurance		
_			
Doe	es filing only apply to certain territory (t	erritories) or certain classes? If so, spec	ity: No
Brie	of description of filing. (If filing follows r	ates of an advisory organization, specify	(Organization). The purpose of this filing
to int	troduce revisions to our Private Passenger Autor	mobile program. We are revising base rates by co	rerage as well as implementing new
	bol assignments and factors.	,	
-,			
*Ad	justed to reflect all prior rate changes.		
**C	hange in Company's premium level wh	nich will result from application of new ra	tes.
		American National Gene	ral Insurance Company
			Name of Company
		James Gillette, VP and A	ctuary
			Official Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change-in-Company's-premium-or-rate-level-produced-by-rate-revision-effective-2/4/13 New-Business and Renewal

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
_	Passenger Commercial	\$3,316,305	-0.3%
2.	Automobile Physical Damage	#4.70C.07E	-0.2%
3.	Private Passenger Commercial Liability Other Than Auto	\$1,785,875	-0.276
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril Crop Hail		
	Other		
10.	Line of Insurance		
Doe	es filing only apply to certain territory (territories) or certain classes? If so, specify:	No
Brie	ef description of filing. (If filing follows	rates of an advisory organization, specify orga	anization): The purpose of this filing
to in	troduce revisions to our Private Passenger Auto	mobile program. We are revising base rates by coverage	as well as implementing new
sym	bol assignments and factors.		
	ljusted to reflect all prior rate changes hange in Company's premium level w	hich will result from application of new rates.	
		American National Property An	d Casualty Company
			me of Company
		James Gillette, VP and Actuary	,
			Official Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/25/2012 ((enew)a | Only)

	/ ′	
(1)	(2)	(3)
	Annual Premium	Percent
Coverage	Volume (Illinois) *	Change (+or-) **
Automobile Liability Private		
Passenger	36,451	12.5%
Commercial		
Automobile Physical Damag		
Private Passenger	32,533	6%
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		·
Fidelity	· · · · · · · · · · · · · · · · · · ·	
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail Other	44-44-4	
Life of Insurance		
Life of insurance		
Does filing only apply to certa	in territory (territories) o	r certain
Classes? If so,	, (
specify: No		
Brief description of filing. (If f	iling follows rates of an a	advisory
Organization, specify	g / /	,
organization):	Changes to Base rate	s and added 2014 to model year
factors		
*Adjusted to reflect all prior ra	ite changes	
**Change in Company's prem		Ilt from application of new
rates.		
10.00.	Rick Miller	Charter Indemn
		me of Company
	Product Manager	The or company
		Official Title
		Official – Title

SUMMARY SHEET Form (RF-3)

			NB: 11/15/2012
Change in	Company's premium or rate level produ	ced by rate revision effective:	RN: 01/15/13
Program:	IL AUTOMOBILE		
	(1)	(2)	(3)
	• •	Annual Premium	Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1	Automobile Liability		
	Private Passenger	\$2,422,028	0.00%
	Commercial		
2	Automobile Physical Damage		
	Private Passenger	\$592,919	14.30%
	Commercial		
3	Liability Other Than Auto		
4	Burglary and Theft	12 MSV.	
5	Glass		
6	Fidelity		
7	Surety		
8	Boiler and Machinery		
9	Fire		
10	Extended Coverage		
11	Inland Marine		
12	Homeowners		
13	Commercial Multi-Peril		
14	Crop Hail		
15	Other		
دد	Outer		
Does filin	g only apply to certain territory/terri	tories or certain classes? If so, so	ecify:
DOCS HIIII	6 only apply to certain territory/terri	tories of certain classes: it so, sp	
Thic filing	applies to all classes and all territori	les.	
iiiis iiiiig	applies to all classes and all territor		
Briof dos	cription of filing. (If filing follows rat	es of an advisory organization, sno	ecify organization):
	s for CP and CL were increased. Veh		
oase rate	s for CF and CL Were increased. Ver	incle age factors for ages 0,1 2 and	S Were mereased.
:	* Adjusted to reflect all prior rate ch	anges	
	* Change in Company's premium lev	_	
	result from application of new rate		
	result from application of new rate	-5.	
		Conifor	Insurance Company
			me of Company
		iva	me or company
		n	ochollo Kanlan
			ochelle Kaplan
		G	eneral Counsel

Change i	n Company's premium or rate level prod	uced by rate revision effective:	November 11, 2012
	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		0.00
	Private Passenger	6,085,495	-0.2%
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger	3,246,671	-0.2%
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Worker's Compensation		
16.	Other		
	Line of Insurance		
oes filin	g only apply to certain territory (territorie	es) or certain classes? If so, specify	•
rritorie	s 16,47,49,56,57,58,59,61,63,68,69,82 <mark>,8</mark> 7	,149,409,415,416,443	
	cription of filing. (If filing follows rates of mending our auto territory def		organization):
*Change	d to reflect all prior rate changes.		·
will res	ult from application of new rates.	COLDIED V.C. 1: 1	
		COUNTRY Casualty Insurance	Company
		Name of Company	
		Reshard a South	
		Dishard A Carith	
		Richard A. Smith Chief Property/Casualty Actuar	

(1) (2) Annual Premium Volume (Illinois)* Percent Change Volume (Illinois)* (+ or -)** 1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger 87,356,793 -0.1% Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filing only apply to certain territory (territories) or certain classes? If so, specify: cories 16.47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filing follows rates of an advisory organization, specify organization): rea amending our auto territory definitions and factors. COUNTRY Mutual Insurance Company Name of Company Nam	inge i	n Company's premium or rate level prod	duced by rate revision effective:	November 11, 2012
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filing only apply to certain territory (territories) or certain classes? If so, specify: tories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing, (If filing follows rates of an advisory organization, specify organization): reamending our auto territory definitions and factors. COUNTRY Mutual Insurance Company Name of Company			Annual Premium	Percent Change
Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filling only apply to certain territory (territories) or certain classes? If so, specify: tories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filling follows rates of an advisory organization, specify organization): tree amending our auto territory definitions and factors. COUNTRY Mutual Insurance Company Name of Company Ashack A. Smith Chief Property/Casualty Actuary		Coverage	Volume (Illinois)*	(+ or -)**
Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filling only apply to certain territory (territories) or certain classes? If so, specify: tories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filling follows rates of an advisory organization, specify organization): tree amending our auto territory definitions and factors. COUNTRY Mutual Insurance Company Name of Company Ashack A. Smith Chief Property/Casualty Actuary	1.	Automobile Liability		
Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filling only apply to certain territory (territories) or certain classes? If so, specify: tories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filling follows rates of an advisory organization, specify organization): en amending our auto territory definitions and factors. COUNTRY Mutual Insurance Company Name of Company			100,795,770	-0.2%
Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filing only apply to certain territory (territories) or certain classes? If so, specify: tories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filing follows rates of an advisory organization, specify organization): re amending our auto territory definitions and factors. COUNTRY Mutual Insurance Company Name of Company		Commercial		
Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filling only apply to certain territory (territories) or certain classes? If so, specify: tories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filling. (If filling follows rates of an advisory organization, specify organization): re amending our auto territory definitions and factors. COUNTRY Mutual Insurance Company Name of Company	2.			
3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filling only apply to certain territory (territories) or certain classes? If so, specify: torics 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filling. (If filling follows rates of an advisory organization, specify organization): re- amending our auto territory definitions and factors. COUNTRY Mutual Insurance Company Name of Company Name of Company COUNTRY Mutual Insurance Company Name of Company Name of Company Richard A. Smith Chief Property/Casualty Actuary		÷ i	87,356,793	-0.1%
4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filling only apply to certain territory (territories) or certain classes? If so, specify: tories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filling. (If filling follows rates of an advisory organization, specify organization): re amending our auto territory definitions and factors. COUNTRY Mutual Insurance Company Name of Company Name of Company Name of Company Richard A. Smith Chief Property/Casualty Actuary	_			
5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filing only apply to certain territory (territories) or certain classes? If so, specify: tories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filing follows rates of an advisory organization, specify organization): re amending our auto territory definitions and factors. COUNTRY Mutual Insurance Company Name of Company Paches Company Name of Company Richard A. Smith Chief Property/Casualty Actuary		•		
6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filing only apply to certain territory (territories) or certain classes? If so, specify: tories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filing follows rates of an advisory organization, specify organization): the amending our auto territory definitions and factors. usted to reflect all prior rate changes. ange in Company's premium level which ll result from application of new rates. COUNTRY Mutual Insurance Company Name of Company Paleal A. Smith Chief Property/Casualty Actuary		•		
7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filing only apply to certain territory (territories) or certain classes? If so, specify: tories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filing follows rates of an advisory organization, specify organization): the amending our auto territory definitions and factors. usted to reflect all prior rate changes. ange in Company's premium level which li result from application of new rates. COUNTRY Mutual Insurance Company Name of Company Pachael A Smith Chief Property/Casualty Actuary				
8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filing only apply to certain territory (territories) or certain classes? If so, specify: tories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filing follows rates of an advisory organization, specify organization): the amending our auto territory definitions and factors. usted to reflect all prior rate changes. ange in Company's premium level which Il result from application of new rates. COUNTRY Mutual Insurance Company Name of Company Richard A. Smith Chief Property/Casualty Actuary		•		
9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filling only apply to certain territory (territories) or certain classes? If so, specify: tories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filling. (If filling follows rates of an advisory organization, specify organization): re amending our auto territory definitions and factors. usted to reflect all prior rate changes. ange in Company's premium level which Il result from application of new rates. COUNTRY Mutual Insurance Company Name of Company Amending Company Richard A. Smith Chief Property/Casualty Actuary				***************************************
10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filing only apply to certain territory (territories) or certain classes? If so, specify: cories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filing follows rates of an advisory organization, specify organization): re amending our auto territory definitions and factors. usted to reflect all prior rate changes. ange in Company's premium level which Il result from application of new rates. COUNTRY Mutual Insurance Company Name of Company Achael A Smith Chief Property/Casualty Actuary		•		
11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filing only apply to certain territory (territories) or certain classes? If so, specify: tories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filing follows rates of an advisory organization, specify organization): re amending our auto territory definitions and factors. usted to reflect all prior rate changes. ange in Company's premium level which Il result from application of new rates. COUNTRY Mutual Insurance Company Name of Company Palea C. Janth Richard A. Smith Chief Property/Casualty Actuary				
12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filing only apply to certain territory (territories) or certain classes? If so, specify: tories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filing follows rates of an advisory organization, specify organization): the amending our auto territory definitions and factors. Unusted to reflect all prior rate changes, ange in Company's premium level which ll result from application of new rates. COUNTRY Mutual Insurance Company Name of Company Delace A. Smith Chief Property/Casualty Actuary			-	
13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filing only apply to certain territory (territories) or certain classes? If so, specify: ories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filing follows rates of an advisory organization, specify organization): re amending our auto territory definitions and factors. usted to reflect all prior rate changes. ange in Company's premium level which I result from application of new rates. COUNTRY Mutual Insurance Company Name of Company Richard A. Smith Chief Property/Casualty Actuary				
14. Crop Hail 15. Worker's Compensation 16. Other Line of Insurance filing only apply to certain territory (territories) or certain classes? If so, specify: cories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filing follows rates of an advisory organization, specify organization): re amending our auto territory definitions and factors. usted to reflect all prior rate changes. ange in Company's premium level which I result from application of new rates. COUNTRY Mutual Insurance Company Name of Company Auto Lawa Lawa Company Richard A. Smith Chief Property/Casualty Actuary				
15. Worker's Compensation 16. Other Line of Insurance filing only apply to certain territory (territories) or certain classes? If so, specify: ories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filing follows rates of an advisory organization, specify organization): re amending our auto territory definitions and factors. usted to reflect all prior rate changes. ange in Company's premium level which I result from application of new rates. COUNTRY Mutual Insurance Company Name of Company Ochard A. Smith Chief Property/Casualty Actuary				
Line of Insurance filing only apply to certain territory (territories) or certain classes? If so, specify: tories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filing follows rates of an advisory organization, specify organization): re amending our auto territory definitions and factors. usted to reflect all prior rate changes. ange in Company's premium level which Il result from application of new rates. COUNTRY Mutual Insurance Company Name of Company Richard A. Smith Chief Property/Casualty Actuary				
filing only apply to certain territory (territories) or certain classes? If so, specify: tories 16,47,49,56,57,58,59,61,63,68,69,82,87,149,409,415,416,443 description of filing. (If filing follows rates of an advisory organization, specify organization): the amending our auto territory definitions and factors. usted to reflect all prior rate changes. ange in Company's premium level which Il result from application of new rates. COUNTRY Mutual Insurance Company Name of Company Albert A. Smith Chief Property/Casualty Actuary	16.	Other		
description of filing. (If filing follows rates of an advisory organization, specify organization): the amending our auto territory definitions and factors. usted to reflect all prior rate changes. ange in Company's premium level which Il result from application of new rates. COUNTRY Mutual Insurance Company Name of Company Richard A. Smith Chief Property/Casualty Actuary		Line of Insurance		
ange in Company's premium level which Il result from application of new rates. COUNTRY Mutual Insurance Company Name of Company Cashael A. Smith Chief Property/Casualty Actuary	desc	16,47,49,56,57,58,59,61,63,68,69,82,87 ription of filing. (If filing follows rates of	7,149,409,415,416,443 of an advisory organization, specify	
ange in Company's premium level which Il result from application of new rates. COUNTRY Mutual Insurance Company Name of Company Cashael A. Smith Chief Property/Casualty Actuary				
Chief Property/Casualty Actuary	ange	in Company's premium level which	Name of Company Ochael a South	Company
				/

Change i	n Company's premium or rate level prod	uced by rate revision effective:	November 11, 2012
	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
		voicine (minore)	
1.	Automobile Liability		0.40
	Private Passenger	141,322,981	-0.4%
	Commercial		
2.	Automobile Physical Damage	7.04 666 025	0.29
	Private Passenger	104,666,937	-0.3%
2	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Worker's Compensation		
16.	Other		
	Line of Insurance		
es filin	g only apply to certain territory (territorio	es) or certain classes? If so, specify	v :
	s 16,47,49,56,57,58,59,61,63,68,69,82,87		
1110110	, 10, 11, 12,00,01,00,00,00,00,00,00	,,,,,	
	ription of filing. (If filing follows rates of mending our auto territory def		organization):
	· · · · · · · · · · · · · · · · · · ·		
	d to reflect all prior rate changes.		
	in Company's premium level which		
will res	ult from application of new rates.	COUNTRY Descend Leaves	. Common.
		COUNTRY Preferred Insurance	e Company
		Name of Company	
		Ocharl a South	
		Richard A. Smith	
		Chief Property/Casualty Actuar	у
		Official and Title	

FORM (RF-3)

Change in	Company's premium or rate level produced by rate revision
effective	September 25, 2012

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
			
1.	Automobile Liability Private		
	Passenger	\$658,227	8.0%
_	Commercial		
2.	Automobile Physical Damage		
	Private Passenger	\$250,668	10.0%
	Commercial		
	Liability Other Than Auto	***	Paris de Presidente
4.	Burglary and Theft		
5.	Glass		
3 .	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
Э.	Extended Coverage		
1.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail		
5.	Other		
	Life of Insurance		
	Does filing only apply to certain territo No.	ory (territories) or certain classes	s? If so, specify:
	Brief description of filing. (If filing follo Base Rate adjustments across all terr		
-	Base Rate adjustments across all ten	itories to BI, PD, CMP, and CO	
*		es.	L coverages.
*	Base Rate adjustments across all term Adjusted to reflect all prior rate change	es. which will result from applicatio	L coverages. n of new rates.
-	Base Rate adjustments across all term Adjusted to reflect all prior rate change	es.	L coverages. n of new rates. surance Company
*	Base Rate adjustments across all term Adjusted to reflect all prior rate change	es. which will result from applicatio	n of new rates.

2

3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14.

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

| Change in Company's | premium or | rate l | level p | produced | by | rate | revisi | on |
|----------------------|------------|--------|---------|----------|----|------|--------|----|
| effective 10/21/2012 | | , | | | Ť | | | |

| (1) | (2)
Annual Premium | (3)
Percent |
|---|--|--|
| Coverage | Volume (Illinois) * | Change (+or-) ** |
| Automobile Liability Private | | |
| Passenger | \$1,955,866 | 12.7% |
| Commercial | | |
| Automobile Physical Damag | | |
| Private Passenger | \$1,068,908 | 14.1% |
| Commercial | | |
| Liability Other Than Auto | | |
| Burglary and Theft | | |
| Glass | | |
| Fidelity | | |
| Surety | | |
| Boiler and Machinery | | |
| Fire | | |
| Extended Coverage | | Mariana and the same and the processing of the same and t |
| Inland Marine | | |
| Homeowners | | |
| Commercial Multi-Peril | *************************************** | |
| Crop Hail | | |
| Other | | |
| Life of Insurance | Annual Control of the | Age and partners of the first specific for th |
| Does filing only apply to certa | in territory (territories) or | certain |
| Classes? If so, | . footors were lawared in the | Chicago DMA and increased |
| *************************************** | / factors were lowered in the (| *************************************** |
| most everywhere else. Class factor | | |
| Brief description of filing. (If fi | ling follows rates of an ac | ivisory |
| Organization, specify | | |
| organization): | | J. T. William F. Franker |
| Revisions to Base Rates, Core Disc | count Factors, Class Factors, | and Territory Factors |
| *A disease of the second second second | 4 4 | |
| *Adjusted to reflect all prior ra
**Change in Company's prem
rates. | • | t from application of new |
| · www. | Elephan | it Insurance Company |
| | | ne of Company |
| | | AS, MAAA, Manager, Pricing |
| | | Official – Title |
| | | |

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/03/2012

| * | (1)
Coverage | (2) Annual Premium Volume (Illinois) * | (3)
Percent
Change (+or-) ** |
|------------|-------------------------------------|--|--|
| 1. | Automobile Liability Private | volume (minois) | Charige (+012) |
| 1. | Passenger | \$1,955,866 | 0.0% |
| | Commercial | \$1,333,000 | 0.076 |
| 2 | Automobile Physical Damag | | |
| ۲., | Private Passenger | \$1,068,908 | 0.0% |
| | Commercial | Ψ1,000,000 | 0.070 |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | AND AND THE RESERVE OF CHARLES AND |
| 6.
6. | Fidelity | | |
| 7. | Surety | | |
| 8 . | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | And the state of t |
| 11. | Inland Marine | | ************************************** |
| 12. | Homeowners | | And the second s |
| 13. | Commercial Multi-Peril | | *************************************** |
| 14. | Crop Hail | | |
| 15. | Other | | |
| 10. | Life of Insurance | | |
| * | Life of fristratice | | |
| • | Does filing only apply to certa | in territory (territories) or | certain |
| | Classes? If so, | | |
| | specify: No | | |
| | | | |
| | Brief description of filing. (If fi | iling follows rates of an a | dvisory |
| | Organization, specify | | |
| | organization): | Change in E-signature | discount with adjusted base rate |
| | to neutralize impact | | |
| | | | |
| | *Adjusted to reflect all prior ra | | lt Coome manufication of many |
| | **Change in Company's premates. | ilum level which will resu | it from application of new |
| | Tales. | Elephant Insuranc | e Company |
| | | | me of Company |
| | | Brett Myers - Pricit | |
| | | | Official – Title |

| Form (| (RF-3) |
|--------|--------|
| | |

SUMMARY SHEET

| | (1) | | | |
|------|--|----------------------|--|---|
| | | (2)
Annual Pro | emium | (3)
Percent |
| | Coverage | Volume (II | linois)* | Change (+ or -)** |
| Auto | omobile Liability | | | |
| | Private Passenger | \$ | 663,881 | 0.0% |
| | Commercial | | | |
| | omobile Physical Damage | _ | | |
| | Private Passenger
Commercial | | 474,543 | 0.0% |
| Liab | ility Other Than Auto | | | |
| Burg | glary and Theft | | | |
| Glas | SS | | | |
| Fide | , | 40.7 | | |
| Sur | · · | | | |
| | er and Machinery | , | | |
| Fire | · · · · · · · · · · · · · · · · · · · | | ······································ | |
| | ended Coverage | | | |
| | nd Marine | | | |
| | neowners | | | |
| | nmercial Multi-Peril | | | |
| | p Hail | | | |
| Oth | er
Line of Insurance | | | |
| Do | es filing only apply to certain territ | ory (territories) or | certain classes? If | f so, specify: |
| | No | | | |
| | | | | *************************************** |
| Brie | of description of filing. (If filing follows | | lvisory organizatior | n, specify organization): |
| | Revisions to base rates and m | odel year factors | | |
| | | | | |

- * Adjusted to reflect all prior rate changes.
 ** Change in company's premium level which will result from application of new rates

Erie Insurance Company

Name of Company

Keith Holler **VP** Actuarial

SUMMARY SHEET

| revision effective. | | 1/1/2013 . | |
|---|---|------------------------|-------------------------------|
| (1) | (2) | | (3) |
| Coverage | | Premium
(Illinois)* | Percent
Change (+ or -)** |
| Automobile Liability | | | |
| Private Passenger | \$ | 29,825,788 | +1.2% |
| Commercial | | | |
| Automobile Physical Damage | | | |
| Private Passenger | \$ | 21,073,454 | +2.6% |
| Commercial | | | |
| Liability Other Than Auto | | | |
| Burglary and Theft | | | |
| Glass | | | |
| Fidelity | | | |
| Surety | | | |
| Boiler and Machinery | | | |
| Fire | | | |
| Extended Coverage | *************************************** | | |
| Inland Marine | *************************************** | | |
| Homeowners | | | |
| Commercial Multi-Peril | | | |
| Crop Hail | | | |
| Other | | ****** | |
| Line of Insurance | | | |
| Does filing only apply to certain territory | | | so, specify: |
| Brief description of filing. (If filing follo | ows rates of an a | advisory organization | , specify organizatior |
| Revisions to base rates, mode | l year factors, m | ulti-policy discount a | nd Rate Protection |
| Endorsement cluster factors. | | | |

Erie Insurance Exchange

Name of Company

Keith Holler **VP** Actuarial

^{*} Adjusted to reflect all prior rate changes.
** Change in company's premium level which will result from application of new rates

| FORM | (RF-3) |
|------|--------|
| | |

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11-14-12 New; 12-19-12 Renewal

| - | (1) | (2) | (3) |
|-----|--|--|---|
| - | Coverage | Annual Premium Volume (Illinois) * | Percent Change (+or-) ** |
| 1. | Automobile Liability Private | Volumo (minoro) | - Griange (*er / |
| | Passenger | \$41,436,910 | +1.59% |
| | Commercial | | |
| 2 | Automobile Physical Damag | | |
| | Private Passenger | \$33,831,612 | +1.73% |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | ************************************** | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | Alexandra de la companya della companya della companya de la companya de la companya della compa | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | *************************************** | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| , | Life of Insurance | | |
| • | | | |
| | Does filing only apply to certa | ain territory (territories) or | certain |
| | Classes? If so, | | |
| | specify: No No | | |
| | Drief description of filing (If | filing follows rates of an a | duioni |
| | Brief description of filing. (If the Organization, specify | ming follows rates of an a | luvisory |
| | organization): | Territory revisions liability | limits increases, UM/UIM rate changes, |
| | | | pool factor revisions, and base rate revisions. |
| | deductible revisions, r of changes, o | lass factor changes, 150 Elability symi | oor ractor revisions, and base rate revisions. |
| | *Adjusted to reflect all prior ra | ate changes | |
| | **Change in Company's pren | • | It from application of new |
| | rates. | | · · · · · · · · · · · · · · · · · · · |
| | | THE FARMERS AUTOMO | BILE INSURANCE ASSOCIATION - VIP Program |

Name of Company
Edward A. Mulvey, Vice President of Underwriting
Official – Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/25/2012 ('Cenewal on ly)

| (1) | (2) | (3) |
|------------------------------------|---|--|
| | Annual Premium | Percent |
| Coverage | Volume (Illinois) * | _ Change (+or-) ** |
| Automobile Liability Private | | |
| Passenger | 341,836 | 23.2 |
| Commercial | | |
| Automobile Physical Damag | | |
| Private Passenger | 219,700 | 6.4 |
| Commercial | | |
| Liability Other Than Auto | | |
| Burglary and Theft | | |
| Glass | | |
| Fidelity | | |
| Surety | ************************************** | |
| Boiler and Machinery | | |
| Fire | | |
| Extended Coverage | ************************************** | *************************************** |
| Inland Marine | | |
| Homeowners | | |
| Commercial Multi-Peril | | |
| Crop Hail | | |
| Other | | |
| Life of Insurance | | - All All All All All All All All All Al |
| Does filing only apply to certa | in territory (territories) o | r certain |
| Classes? If so, | • | |
| specify: No | | |
| | | |
| Brief description of filing. (If f | iling follows rates of an a | advisory |
| Organization, specify | • | • |
| organization): | Changes to Base Rat | es, Points, Discount Matrix, |
| and added 2014 model year vehicl | es to the model year factors | with effective date of 10/25/2012 |
| | | |
| *Adjusted to reflect all prior ra | | |
| **Change in Company's prem | nium level which will resu | ult from application of new |
| rates. | | () - , , , |
| | Rick Miller | Financial Indemnity |
| | Na | ame of Company |
| | Product Manager | |
| | | Official – Title |

ILLINOIS

SUMMARY SHEET (Form RF- 3)

| | Change in Company's premium or rate level pro | oduced by rate revision effective | November 5, 2012 |
|-----|---|---|--|
| | (1)
Coverage | (2)
Annual Premium
<u>Volume (Illinois)*</u> | (3)
Percent
<u>Change (+ or -)**</u> |
| | <u>ooverage</u> | votanie (minore) | <u> </u> |
| 1. | Automobile Liability | | |
| | Private Passenger | \$3,132,043 | 8.6% |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | \$2,030,840 | -4.7% |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |
| | Does fling only apply to certain territory (territori | ies) or certain classes? If so sne | cify. |
| | No | , se, se, and see es, spe | y. |
| | | | |
| | Brief Description of filing (If filing follows rates of Revised base rates for BI, PD, MP, UMBI/UIME Revised rate factors from the following groups: BI Increased Limits, and Points. Rebased Mod Discount. Revised Maximum Discount cap. Mc Surcharge, Speeding Violations, Symbols used and Vehicle Symbols. Modified fees. Added To | Territory, Driver Class, Symbol, I
el Year factors. Eliminated Occaso
odified rules associated with the C
for Physical Damage rating, Acce | ollision. Model Year, sional Operator Older Vehicle eptable Vehicle Age |
| | | | |
| | Adjusted to reflect all prior rate changes. Change in Company's premium level which will | result from the application of new
FIRST CHICAGO INSURAN
Name of Compa | CE COMPANY |
| | | John Gettemans - Pr | esident |
| | | Official - Title | |

Change in Company's premium or rate level produced by rate revision effective 1/15/2013 New; 3/1/2013 Renewals .

| | (1) | (2)
Annual Premium | (3)
Percent |
|-----|----------------------------|-----------------------|-------------------|
| | Coverage | Volume (Illinois) * | Change (+ or -)** |
| 1. | Automobile Liability | | |
| Ι. | Private Passenger | \$314,436 | +4.0% |
| | Commercial | | |
| 2. | Automobile Physical Damage | | 2.00/ |
| | Private Passenger | \$280,589 | 3.0% |
| 2 | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| LO. | Extended Coverage | | |
| L1. | Inland Marine | | |
| L2. | Homeowners | | |
| L3. | Commercial Multi-Peril | | |
| L4. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: Filing does not apply to specific territories or classes only.

Brief description of filing. (If filing follows rates of an advisory organization, list organization): Revise base rates, introduce new B.I. increased limits factors, revise premiums for higher UM/UIM limits, and change primary class rating factors for non-youthful farm use and business use classes. Overall rate change is +0.7%.

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

Goodville Mutual Casualty Company
Name of Company

Brian Frankhouser, Actuarial Analyst
Official - Title

| Oiiii | (KF-3) | -SUMMARY SHEET | |
|--------------------|---|--|--|
| | Change in Company's premiurevision effective 12/1/12 | m or rate level produced by
New Business, 1/1/13 Renewa | |
| | (4) | (0) | 4.0 |
| | (1) | (2) | _(3) |
| | | Annual Premium | Percent |
| | Coverage | Volume (Illinois)* | Change (+ or -) ** |
| 1 / | Vutamahila Liahilitu | | |
| | Automobile Liability | 202.402 | 0.20/ |
| | Private Passenger
Commercial | 202,102 | 0.3% |
| | | | |
| | Automobile Physical Damage | 00.000 | 0.00/ |
| | Private Passenger | 93,996 | -0.3% |
| | Commercial | | |
| | iability other than Auto | | |
| 4. E | Burglary and Theft | | |
| | Glass | | |
| | idelity | | |
| | Surety | | |
| | Boiler and Machinery | | |
| 9. F | | | |
| | Extended Coverage | | |
| | nland Marine | | |
| | lomeowners | | |
| | Commercial Multi-Peril* | | |
| | Crop Hail | | |
| 5. C | Other | | |
| J <u>ac</u>
Bri | esses? If so, specify: Yes,
ckson, Union, Williamson, Champaign
ief description of filing. (If filing
ganization, specify organization): | follows rates of an advisory | amon, Vermilion |
| _ | | | |
| * | Adjusted to reflect all prior rat * Change in Company's premiur result from application of new | n level which will | |
| | | | Grange Indomnity Insurance Company |
| | | | Grange Indemnity Insurance Company Name of Company |
| | | | |
| | | | Tennille Byrd, Product Manager |
| | | | Official - Title |

| (| Change in Company's premium or rate | level produced by rate revision effect | ive 10/6/2012 10/15/2019 |
|-------------------------|---|---|--------------------------------------|
| | (1) | (2) | (3) |
| | (1) | Annual Premium | Percent |
| | Coverage | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| | Automobile Liebility | | |
| ١. | Automobile Liability Private Passenger | \$128,994,585 | -0.4% |
| | Commercial | \$120,774,505 | |
| 2. | Automobile Physical Damage | | |
| ۷. | Private Passenger | \$90,279,320 | -0.2% |
| | Commercial | <u> </u> | |
| 3. | Liability Other Than Auto | | |
| <i>3.</i>
4 . | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |
| No - | filing only apply to certain territory (te
this filing will affect all rating territori
description of filing. (If filing follows | es and classes of customers. | |
| Brief | description of filing. (If filing follows a this filing, we are making changes to | the following rating variables: rate ma | atrix, household structure. |
| | tims ming, we are making enanges to | the following the same of the | |
| | | | |
| ** C | djusted to reflect all prior rate changes thange in Company's premium level who self them application of new rates. | | |
| | | _ | Ilinois Farmers Insurance
Company |
| | | | Name of Company |
| | | | Kevin Hallsky - Sr. Product |
| H292 | 100 | | Official - Title |
| 1777 | 170 | | |

| Form (RF-3) Summa | ry Sheet | |
|---|---|-------------------------------|
| Change in Company's premium or rate level produced | by rate revision effective: | 9/17/12 New Business |
| (1) | (2) | 11/16/12 Renewals
(3) |
| Coverage | Annual Premium
Volume (Illinois)*
(000) | Percent
Change (+ or -) ** |
| 1. Automobile Liability | ` , | |
| Private Passenger | \$590 | 3.8% |
| -
Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | \$245 | .7% |
| - | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Worker's Compensation | | |
| 16. Other | | |
| Line of Insurance | | |
| Does the filing apply to certain territory (territories) o | r certain classes? If so, spec | ify: No |
| Brief description of filing. (If filing follows rates of a Adjust territory factors, model year factors, driver clar proposed groups and points. | | |
| * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which resu from application of new rates. | lt | |
| _ | | sualty Insurance Company |
| - | | f Company |

Liset Gonzalez Product Analyst

FORM (RF-3)

| Change i | n Company's
3/1/2013 | premium o | or rate | level | produced | by rate | revision |
|-----------|-------------------------|-----------|---------|-------|----------|---------|----------|
| effective | 3/1/2013 | | | | | | |
| CHECHIVE | | | | | | | |

| | (1)
Coverage | (2)
Annual Premium
Volume (Illinois) * | (3)
Percent
Change (+or-) ** |
|----------|--|--|--|
| ۱. | Automobile Liability Private | The second secon | |
| | Passenger | \$1,011,443 | -0.04% |
|) | Commercial Automobile Physical Damag | the second secon | And the same shows th |
| • | Private Passenger | \$774,658 | -3.55% |
| | Commercial | Will a gas a seeman - " had a a seeman seeman prosper | |
| 3. | Liability Other Than Auto | Acceptance of the second secon | |
| ١. | Burglary and Theft | | The second secon |
| j. | Glass | 4 A P A P A P A P A P A P A P A P A P A | |
| j, | Fidelity | | |
| | Surety | Administration 11 - 1 and 1 and 1 - 1 and 1 and 1 - 1 an | |
| | Boiler and Machinery | - | AND AND AND AND THE STREET, AND |
| ١. | Fire | AMERICAN IN CO. S. THE STATE OF SECURITY SECURIT | water-management of the state o |
| 0. | Extended Coverage | | to an above 19th and a sum and a sum a sum and a sum and a sum a s |
| 1. | Inland Marine | genoments to get a strategy or matifolism ways now as the set or story of Fixer spin, processing pro- | Noncommunication of the parameters of the SAAMOVAN A. S. |
| 2. | Homeowners | · ANNE MAR AN AN A PARA ANTA ANTA MARKATANA ANTA ANTA ANTA ANTA ANTA ANTA ANT | |
| 3.
4 | Commercial Multi-Peril | | |
| 4.
5. | Crop Hail | which design measures were a superior section of their | MANAGEMENT A 19 COMPANIES OF THE STREET STREET, AND STREET STREET STREET STREET. |
| J. | Other Life of Insurance | graphic and second seco | 100 Mars 11, 2, 10 - 20 - 20 - 20 - 20 - 20 - 20 - 20 - |
| | | | |
| | Does filing only apply to certain | n territory (territories) or | certain |
| | Classes? If so, | the filing applies to all territor | ries. |
| | | · | |
| | Brief description of filing. (If fil Organization, specify organization): and territory, adjustment to the fina deductible structure, and shifting the | ing follows rates of an ad
This filing consists of ad
ancial stability factors, change
the base model year to currer | justments to base rates by coverage
es to our physical damage |
| | *Adjusted to reflect all prior rate **Change in Company's premi | | t from application of new |
| | rates. | Iowa Mutual Insura | nce Company |
| | | and the same of th | ne of Company |
| | | Ċ | Official - Title |

FORM (RF-3)

SUMMARY SHEET

| Change in Company's premium of | r rate level produced by rate revision |
|--------------------------------|--|
| effective 11/01/2012 | |

| - | (1) | (2) | (3) |
|----------|---|---------------------|---|
| - | Coverage | Annual Premium | Percent |
| 1 | Coverage | Volume (Illinois) * | Change (+or-) ** |
| 1. | Automobile Liability Private Passenger Commercial | 3,904,255 | +7.1% |
| 2 | Automobile Physical Damag Private Passenger Commercial | 2,144,214 | +6.4% |
| 3.
4. | Liability Other Than Auto Burglary and Theft | | |
| 5.
6. | Glass
Fidelity | | |
| 7. | Surety | | |
| 8.
9. | Boiler and Machinery Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Life of Insurance | | |
| • | · | • , , | certain
3, 90, 91. Driver Class - SM30 - |
| | SM34 and SF23 - SF49. | | |
| | Brief description of filing. (If f Organization, specify | • | • |
| | organization):
renewal discount, and add zip code | | ritory factors, driver class factors |
| | *Adjusted to reflect all prior ra **Change in Company's premates. | | It from application of new |
| | | Omni Indomnity C | omen anu |

Omni Indemnity Company
Name of Company
Alice Grillo, Sr. Product Consultant
Official – Title

| FA | RM. | /RI | - -3) |
|---------------------|-------|-----|------------------|
| $\Gamma \mathbf{U}$ | T IVI | | J) |

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11-14-12 New; 12-19-12 Renewal

| | (1) | (2)
Annual Premium | (3)
Percent |
|----|--|---|--|
| | Coverage | Volume (Illinois) * | Change (+or-) ** |
| | Automobile Liability Private | | |
| | Passenger | \$2,336,875 | +7.41% |
| | Commercial | | |
| | Automobile Physical Damag | | |
| | Private Passenger | \$1,373,104 | +4.23% |
| | Commercial | | |
| | Liability Other Than Auto | | |
| | Burglary and Theft | | |
| | Glass | | |
| | Fidelity | | |
| | Surety | | |
| | Boiler and Machinery | | |
| | Fire | | |
| ١. | Extended Coverage | | |
| | Inland Marine | | |
| | Homeowners | | |
| ·. | Commercial Multi-Peril | *************************************** | |
| ٠. | Crop Hail | | |
| | Other | | |
| | Life of Insurance | | |
| | Does filing only apply to certa Classes? If so, specify: No | in territory (territories) o | r certain |
| | Drief description of filing (If f | iling follows rates of an | advicen |
| | Brief description of filing. (If f Organization, specify | ming tollows rates of an a | advisory |
| | organization): | Territory revisions, liabilit | y limits increases, UM/UIM rate changes, |
| | deductible revisions, FSL changes, class to | | · · · · · · · · · · · · · · · · · · · |
| | | , | |
| | *Adjusted to reflect all prior ra
**Change in Company's premates. | | ult from application of new |
| | | PEKIN INS | URANCE COMPANY |
| | | Na | ame of Company |
| | | Edward A. Mulvey | , Vice President of Underwriting |

Official - Title

| FORM: | (RF-3) |
|-------|--------|
|-------|--------|

| Change in Company's premium or r | ate level produced by rate revision |
|----------------------------------|-------------------------------------|
| effective 11/02/2012 | |

| _ | (1) | (2) | (3) | | |
|----|---|---|---|--|--|
| _ | | Annual Premium | Percent | | |
| | Coverage | Volume (Illinois) * | Change (+or-) ** | | |
| | Automobile Liability Private | | | | |
| | Passenger | 20,115,852 | (1%) | | |
| | Commercial | 1,364,209 | none | | |
| | Automobile Physical Damag | | | | |
| | Private Passenger | 14,640,372 | none | | |
| | Commercial | 198,670 | none | | |
| | Liability Other Than Auto | | | | |
| | Burglary and Theft | | | | |
| | Glass | | | | |
| | Fidelity | | | | |
| | Surety | | | | |
| | Boiler and Machinery | | | | |
| | Fire | | | | |
| ١. | Extended Coverage | | | | |
| | Inland Marine | | | | |
| | Homeowners | | ###################################### | | |
| | Commercial Multi-Peril | | - Val | | |
| | Crop Hail | | *************************************** | | |
| | Other | *************************************** | | | |
| • | Life of Insurance | | | | |
| • | Does filing only apply to certain territory (territories) or certain Classes? If so, | | | | |
| | , | ses, all territories | | | |
| | | | | | |
| | Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Reduce Med Pay rates statewide 25%, clarify renewa | | | | |
| | organization): | | es statewide 25%, clarity renewa | | |
| | discount rules, increase non-owner discount. | | | | |
| | *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new | | | | |
| | rates. | | | | |
| | rates. | Unique Incurance | · Co | | |
| | rates. | Unique Insurance | | | |
| | rates. | | Co.
ame of Company | | |

| -FORM- | (RF=3) | ١ |
|--------|--------|---|
|--------|--------|---|

SUMMARY SHEET

| Change in Company's p | remium or | rate level | produced by | rate revision |
|-----------------------|-----------|------------|-------------|---------------|
| effective 02/03/2013 | • | • | | |

| -
- | (1)
Coverage | (2)
Annual Premium
Volume (Illinois) * | (3) Percent Change (+or-) ** | | |
|--------|--|--|------------------------------|--|--|
| 1. | Automobile Liability Private | voidino (illinioio) | | | |
| ٠. | Passenger | 170,580 | +5.4% | | |
| | Commercial | 170,000 | | | |
| 2 | Automobile Physical Damag | | | | |
| 2 | Private Passenger | 110,669 | +0.9% | | |
| | Commercial | 110,000 | | | |
| 3. | Liability Other Than Auto | | | | |
| 4. | Burglary and Theft | | | | |
| 5. | Glass | | | | |
| 6. | Fidelity | | | | |
| 7. | Surety | | | | |
| 8. | Boiler and Machinery | | | | |
| 9. | Fire | | | | |
| 10. | Extended Coverage | | | | |
| 11. | Inland Marine | | | | |
| 12. | Homeowners | | | | |
| 13. | Commercial Multi-Peril | | | | |
| 14. | Crop Hail | | | | |
| 15. | Other | | | | |
| | Life of Insurance | | | | |
| • | Does filing only apply to certa Classes? If so, specify: No | nin territory (territories) or | certain | | |
| | Brief description of filing. (If filing follows rates of an advisory | | | | |
| | Organization, specify | imig follows rates of arra- | av.55.y | | |
| | ere are no other changes to the | | | | |
| | organization): Base rate revision. There are no other changes to the Rate Manual. | | | | |
| | Trate Management | | | | |
| | *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. | | | | |
| | 10100. | Limitain Dinant Incom | anas Commany | | |

Unitrin Direct Insurance Company

Name of Company

Linsey Mansfield - Director of Product Management

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

| Change in Company's premium or rate levels | vel-produced-by-rate-revision-effective | 10/8/2012 | | |
|---|--|---|--|--|
| (1)
<u>Coverage</u> | (2)
Annual Premium
<u>Volume (Illinois)*</u> | (3)
Percent
<u>Change (+ or -)**</u> | | |
| Automobile Liability Private Page 1977 Page 1977 | \$7,260,451 | -0.1% | | |
| Passenger Commercial 2. Automobile Physical Damage | \$7,200,451 | -0.176 | | |
| Private Passenger Commercial | \$1,638,276 | +2.0% | | |
| 3. Liability Other Than Auto | Ψ1,000,270 | | | |
| Burglary and Theft | | | | |
| 5. Glass | | | | |
| 6. Fidelity | | | | |
| 7. Surety | | | | |
| 8. Boiler and Machinery | | | | |
| 9. Fire | | | | |
| 10. Extended Coverage | *************************************** | | | |
| 11. Inland Marine 12. Homeowners | | | | |
| 13. Commercial Multi-Peril | | | | |
| 14. Crop Hail | | | | |
| 15. Other | | | | |
| Line of Insurance | | | | |
| In this filing, we are revising our Illinois rates. The Monthly 03NS and the Six Month (discount and the quarterly discount and the is to give the insured the option of the pay With this filing, we are: | viking Insurance Company of Wisconsin Viking Insurance Company of Wisconsin Viking Insurance Company of Wisconsin Vigen Products will have identical rates with the renewal effective dates. The purpose of the vicinity in the renewal effective dates are renewal effective dates. The purpose of the vicinity in the renewal effective dates. The purpose of the vicinity in the vicinity i | 'Dairyland Auto" automobile program th the exception of term, paid in full continuing with two identical products | | |
| Updating Base Rates Updating Territory Definition Updating Territory Factors. | | | | |
| There are no other changes being made elsewhere in our manual. | | | | |
| These new rates should help to maintain our company to grow profitably in the future | our products pricing at an adequate and n
ire. The long-term success of this program | nore accurate rate level, thus allowing depends on these changes. | | |
| | | | | |
| *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. | | | | |
| | | nce Company of Wisconsin Name of Company | | |
| | Joshua G | iarbe - Product Manager
Official – Title | | |

SUMMARY SHEET

| (| Change in Company's premium or rate | e level produced by rate revision effective | 12-18-12 N, 02-21-13 R | |
|--|---|---|---------------------------|--|
| | (1) | (2) | (3) | |
| | Coverage | Annual Premium Volume (Illinois)* | Percent Change (+ or -)** | |
| 1. | Automobile Liability | | | |
| | Private Passenger | 540,303 | -2.2% | |
| | Commercial | | | |
| 2. | Automobile Physical Damage | | | |
| | Private Passenger | 541,876 | -2.5% | |
| | Commercial | | - | |
| 3. | Liability Other Than Auto | | | |
| 4. | Burglary and Theft | | | |
| 5. | Glass | | | |
| 6. | Fidelity | | | |
| 7. | Surety | | | |
| 8. | Boiler and Machinery | | | |
| 9. | Fire | | | |
| 10. | Extended Coverage | | | |
| 11. | Inland Marine | | | |
| 12. | Homeowners | | | |
| | Commercial Multi-Peril | | | |
| 13. | | | | |
| 14. | Crop Hail | | | |
| 15. | Other Line of Insurance | | | |
| | Line of Hisurance | | | |
| oes f | iling only apply to certain territory (te | erritories) or certain classes? If so, specify: | | |
| | itories 94, 111, and 119. | , | | |
| | | | | |
| | | | | |
| Brief d | lescription of filing. (If filing follows | rates of an advisory organization, specify | organization): | |
| | | , Medical Payments, Comprehensive | e, & Collision coverages | |
| along with the minimum rate departure factor | | | | |
| | | | | |
| * Cl | djusted to reflect all prior rate change nange in Company's premium level w | | | |
| re | sult from application of new rates. | | | |
| | | West | field Insurance Co. | |

Name of Company

Robert Markwell, Actuarial Analyst

Official - Title

H29219D

H29219D

| (| Change in Company's premium or rat | e level produced by rate revision effecti | ive 12-18-12 N, 02-21-13 R |
|----------------------------|--|---|--|
| | (1) | (2) | (3) |
| | Coverage | Annual Premium Volume (Illinois)* | Percent <u>Change (+ or -)**</u> |
| 1. | Automobile Liability Private Passenger | 3,171,670 | -0.7% |
| | Commercial | | |
| 2. | Automobile Physical Damage
Private Passenger | 2,776,103 | -0.8% |
| | Commercial | 2,770,100 | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10.
11. | Extended Coverage Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance filing only apply to certain territory (territories 94, 111, and 119 | erritories) or certain classes? If so, spec | sify: |
| | | | |
| Rev
alon
* A
** C | description of filing. (If filing follow ised base rats for BI, PD, CSL, g with the minimum rate department of the property of | es. | cify organization): ive, & Collision coverages |
| | | <u>_ w</u> | /estfield National Ins. Co. Name of Company |
| | | | Name of Company |
| | | | obert Markwell, Actuarial |
| | | | Official - Title |